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# "WE'VE ALWAYS BEEN LIKE KIND OF KICKED TO THE CURB." A QUALITATIVE ANALYSIS ON EXPERIENCES OF DISCRIMINATION AND ITS EFFECT ON SELF-ESTEEM AMONG COLLEGE STUDENTS

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A QUALITATIVE ANALYSIS ON EXPERIENCES OF DISCRIMINATION AND  
ITS EFFECT ON SELF-ESTEEM AMONG COLLEGE STUDENTS

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A Thesis  
Presented to the  
Faculty of  
California State University,  
San Bernardino

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In Partial Fulfillment  
of the Requirements for the Degree  
Master of Public Health

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by  
Cindy Mahoney  
June 2019

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by  
Cindy Mahoney  
June 2019  
Approved by:

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## ABSTRACT

**Objective:** The goal of this study was to conduct a systematic review of the relationship between mental health, discrimination, and self-esteem among college students. To further explore this concept, focus group interviews were conducted as a follow up.

**Methods:** Following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, a total of five existing literatures was systematically analyzed. Data analytic tables were used to collect information on population and study characteristics for the first part. The focus groups were transcribed verbatim and results were thematically analyzed to identify emergent constructs.

**Results:** There is a substantial relationship between mental health and discrimination among college students, especially within minority groups. There was a difference in self-esteem within the Asian population when utilizing family support, which affected these students' psychological distress in regards to perceived racial discrimination. Discrimination was associated with physiological distress within the Latino population, and African Americans obtained the highest mean perceived stigma. Focus group results were confirmed similar trends. Students of African American, Asian, and Latino groups shared the same discriminatory experiences when being of darker skin color. For example, a student said, "One time during class we were choosing groups and I heard people say that the Saudi Arabs are lazy and only cheat." "It made me feel so

low.” “No one asked me to be in their groups.” As such, it can be seen that such discriminatory acts can negatively impact students’ self-esteem.

**Conclusion:** The results of the study highlight the need for more public health initiative to address mental health and discrimination among college students and how it affects their self-esteem negatively, especially within minority populations.

## ACKNOWLEDGMENTS

Firstly, I would like to express my gratitude and appreciation to my chair Dr. Monideepa Becerra for her continuous support, motivation, and immense knowledge. Her guidance and encouragement has helped me tremendously in all the time of writing this thesis. She provided her public health expertise during the course of this research, which I am privileged to have observed and learned from. Additionally, I would like to thank the rest of my thesis committee, Dr. Paulchris Okpala and Dr. Benjamin Becerra, for their insightful comments, encouragement, and support. I would like to thank them all for allowing me the opportunity to work on this research project.

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## CHAPTER ONE

### INTRODUCTION

Discrimination occurs when different groups of people are marginalized due to their unique physical attributes or other characteristics. Particularly, racial discrimination occurs when one race is treated unfairly or harassed based on their racial assumption made regarding their race via physical appearance (Ong, Fuller-Rowell, & Burrow, 2009). Gomez, Miranda, and Polanco (2011) stress this issue because a person's mental health can deteriorate due to discrimination leading to negative thoughts or behaviors, including that of suicidal ideation, alcoholism, and drug use. Specifically, the literature shows that African Americans are prone to anxiety due to the mistreatment they receive due to their racial group (Gomez, Miranda, & Polanco, 2011). For example, Fisher, Wallace, and Fenton (2000) found that 36% of African American young adults reported being called discriminatory names, 46% believed that they received a grade lower than they deserved due to their race, and 75% reported being inconvenienced when receiving services (as cited in Ong & Fuller, 2009). Furthermore, a study among American college students was conducted on racial discrimination in attenuated positive psychotic distress, which was found when the most common domain of discrimination was in a public setting for 43.9 % of subjects, followed by discrimination in a school setting at 35.6 % (Anglin, Lighty, Greenspoon, & Ellman, 2014). The study further explains that demographically, African Americans reported significantly higher levels of racial discrimination than

groups in the 'other' category. As such, this consistent exposure to discrimination may result in negative health outcomes, as noted before, especially those related to mental health well-being.

Mental illness is escalating in the United States and there are different forms of it. According to the Center of Disease Control and Prevention (CDC) (2011) mental illness includes longer periods of time in which a person experiences abnormal feelings, behaviors, or thoughts ("Mental Illness Surveillance Among Adults in the United States," 2011). As emphasized in the CDC's Mental Health "Data and Publications" (2018), Americans from ages 18-44 experience hospitalization for mental illnesses such as depression, which is the third leading cause of why these individuals seek medical attention, and those with severe mental illnesses die on average 25 years earlier by comparison to others ("Data and Publications - Mental Health - CDC," 2018). The stigma associated with mental illnesses has caused many individuals to build this misconception that those diagnosed as mentally ill cause harm to society and are looked down upon (Collins, Roth, Cerully, & Wong, 2014). For instance, the U.S. General Social Survey measured respondents' attitudes toward people with mental illnesses. Participants expressed an unwillingness to live next door to a person who is mentally ill. It is estimated that one in five participants feel that people with mental illnesses could be a negative threat and would refuse to work with them (Collins et al., 2014).

Furthermore, while not always included in assessments of mental health, self-esteem is a key component of mental well-being, especially among young adults. Self-esteem varies from each individual and different attributes contribute to the way a person feels about himself/herself. Various social factors will determine how a college student will perform in their academics based on their self-esteem. The judgment of others based on a person's social group can cause one to feel negatively or positively about their circumstances or situations (Chin & Cruz, 2014). A student's upbringing may have a high impact on how one's mentality is morphed and how self-growth will aid an individual into adulthood. Self-growth is defined on how one defines and views their personal success. (Jain, Apple, & Ellis, 2015). It is essential to build self-esteem to constantly practice positive self-growth. The increased risk of cardiovascular disease morbidity and death is highly associated with individuals who display issues in psychosocial domains, such as self-esteem issues, mental illnesses, and how one's coherence will be impacted towards certain conditions, social factors, and environments; however, effects may be short-term or lifelong ("Policy-level interventions and work-related psychosocial risk management in...: EBSCOhost," 2010). Likewise, a study conducted among American college students noted microaggressions, which intentional, unintentional, verbal, or nonverbal racial insults, were likely to have lower self-esteem than their counterparts who did not have such experiences (Nadal, Wong, Griffin, Davidoff, & Sriken, 2014). Cumulatively, the literature notes experiences of discrimination are prevalent in

the U.S. and such experiences can further lead to negative health outcomes, including that of low mental health well-being as well as low self-esteem.

### Research Questions

What is the relationship between mental health and discrimination among college students?

Is self-esteem impacted by mental health status and/or discrimination experiences among college students?

### Significance to Public Health

Addressing self-esteem issues within the college student population is relevant to the public health field because as public health professionals, taking preventative measures is significant in deterring individuals from deteriorating their health, whether physically or mentally. The attitude and knowledge of college students towards low self-esteem can build awareness, educate, and prevent negative outcomes from occurring. With spreading awareness of different forms of discrimination, individuals will have a better understanding of the different social factors that may impact their well-being and perception of other students who are struggling mentally. With this, it may allow students to perform well in school and improve their health overall.

In addition, the following program learning outcomes for the MPH program will be addressed in this study.

- .Evaluate interdisciplinary health behavior theories to promote health equity among vulnerable populations.

The social cognitive theory promotes health equity among vulnerable populations, which could particularly benefit college students who have low self-esteem. The social cognitive theory suggests that individuals who possess some type of confidence, will determine whether they will believe in their ability to accomplish anything through their actions. This theory also proposes that individuals who have mental illnesses such as anxiety and depression are unlikely to experience self-growth because a negative mentality will indicate that he/she will not perform well, or will fail (Ng & Lucianetti, 2016). One vulnerable population are college students who are more susceptible to mental illnesses. This theory will be used to understand if it plays a significant factor in the self-esteem of college students.

- Select communication strategies for different audiences and sectors how it would be advertised.

The thesis will be defended in front of a professional audience and written of a similar audience. The thesis will also be presented in the form of a poster or oral presentation at a local or national conference.

- Interpret results of data analysis for public health research, policy or practice.

Various literature and currently available data will be utilized to make recommendations for public health, especially health education, practices.

## CHAPTER TWO

### LITERATURE REVIEW

More than 50% of Americans will be diagnosed with a disorder or mental illness in their lifetime (“Learn About Mental Health - Mental Health - CDC,” 2018). Mental illnesses arise early in adulthood, particularly by age 24 (Eisenberg, Downs, Golberstein, & Zivin, 2009). This age group is prominent to the college student body because this is the time where these individuals are transitioning into adulthood, and experiencing new and stressful events. Regardless of having multiple resources provided to them, this pressing issue is especially prevalent among the college student population (as cited in Eisenberg, Downs, Golberstein, & Zivin 2009 ). Mental illnesses and seeking care is often associated with stigma (Eisenberg et al., 2009). Mental health stigma is general to the college population, and creates personal stigma for a student (Eisenberg et al., 2009). Personal stigma is impactful on a student’s attitude and behavior when asking for help, which will negatively affect their self-esteem. A large online survey was conducted at 13 American universities in regards to mental health topics. Questions were heavily based on whether students identified themselves with perceived public stigma or personal stigma. The mean level of perceived stigma was 2.43, which resulted in being significantly higher than the mean level of personal stigma, which was 1.01 (Eisenbniferg et al., 2009). It is important to guide students to suitable resources to dismantle stigma and to hinder any

student's mental health from deteriorating, which can be obtrusive to a student's academic performance.

Eisenberg, Golberstein, and Gollust explain it is also quite common that students are completely unaware of having a mental disorder, or do not identify themselves as having mental disorders when they are aware (as cited in Eisenberg et al., 2009). It is vital that college students understand the symptoms of mental illnesses and mental disorders so that they can be linked to care or properly diagnosed by a mental health professional. Discrimination, mental health, and mental illness greatly impact students' cognitive behavior and negatively affect these individuals' academic performances, especially in multiple minority groups due to racial discrimination. It is proposed that the terms emic and etic are used in order to better understand the concept of discrimination between groups and the differences involved (Hwang & Goto, 2009). The emic perspective is obtained from an individual inside the group and etic is observed from an individual who is not a part of the culture by any means (Hwang & Goto, 2009). This is significant because this gives valuable insight on what is being examined from an outside and inside cultural perspective.

The GED global measure examines the various types of discriminatory experiences that these Asian and Latino Americans have faced in professional and social settings. Due to these circumstances these two minority groups experience increased stress, which negatively impacts these minority college students in their everyday lives. In the study analyzed by Hwang and Goto



(2009), the GED global measure resulted in both minority groups obtaining similar results on a 6-point Likert-type scale while studying perceived lifetime exposure to discriminatory events and stress associated with each type of discrimination. In this study, 107 Asian Americans and 79 Latinos responded. The authors reported a mean exposure to discrimination, measured using the GED scale, to be 37.06 among Asian Americans and a comparable 37.62 among Latinos (Hwang & Goto, 2009). In addition, discrimination was significantly associated with physiological distress ( $r = .43$ ,  $p < .01$ ). Latinos reported feeling like they have been accused of doing something wrong; for example, committing crimes, cheating in school work, and not doing their fair share in any line of work. As for Asian Americans, forms of discrimination they have experienced are microassaults, microinsults, and microinvalidations (Hwang & Goto, 2009).

In the Levels of Stigma: Overall, by Gender, and by Race/Ethnicity study conducted by Eisenberg et al. (2009) indicated that African Americans obtained the highest mean perceived stigma at 2.77 in comparison to white students at a mean of 2.38. Asian students had the highest mean level of personal stigma at 1.45 compared to every other group. When examining the relationship between perceived stigma and personal stigma, they were positively correlated at  $r = .37$ , 95% CI (0.26, 0.49) (Eisenberg et al., 2009). Numerous students reported high perceived public stigma and low personal stigma but nearly no student reported the opposite, high personal stigma and low perceived public stigma. Personal stigma was substantially higher in those who were younger, international

students, and very religious. Heterosexuals also experienced higher personal stigma compared to those who were gay, lesbian, or homosexual (Eisenberg et al., 2009). These findings express that these individuals who possess high personal stigma may hold a preconceived notion and believe others to view them in a negative light.

Discrimination can cause low self-esteem and low self-esteem may develop into a mental illness. Looking at self-esteem in college students is significant in relation to mental illness and discrimination because it is evident that students are not receiving proper care because some individuals may be unaware of their mental illness or do not feel comfortable seeking help. There are multiple contributing factors that refrain students from utilizing resources and it is crucial to implement interventions that focus cultural aspects because most of the college students being affected by this issue are mainly minority groups.

## CHAPTER THREE

### METHODS

The study used qualitative data in which focus group interviews were conducted on students and their responses were audio recorded. An email was sent requesting for participants to five general education lab instructors. Students from three labs were chosen on a voluntary basis. There were 18 students and they were divided into three different focus groups. The focus groups were essential in exploring whether self-esteem is impacted by mental health status and/ or discrimination experiences among college students and if there is a relationship between mental health and discrimination. Interview questions included whether students experience discrimination of any sort during their daily life, and if they have, to please describe it, experiences of discrimination they believe others may experience, and how it impacts their self-esteem or others'. The focus group interviews were transcribed verbatim onto a written document and results were thematically analyzed to identify emergent constructs.

#### Study Design

This study is a systematic literature review followed by one-on-one semi-structured interviews to provide qualitative assessment of the relationship between mental health and discrimination, and how that impacts self-esteem among college students.

Systematic literature enhances the evaluation of each available literature on this topic (HLS-EU) Consortium Health Literacy Project European et al.,

2012). It aids in the examination of the prevalence of, risk factors, and outcomes of individuals who experience suffering from mental illnesses. Its design for providing complete evidence relevant to the research questions helps display studies found accurately and enhances the quality of information.

Furthermore, qualitative studies allow for in-depth exploration of why such phenomenon noticed in the empirical literature occurs and as such, incorporating both allows for a better understanding of the factors related to self-esteem among college students (Creswell, 2014).

#### Data Source and Review Process

PRISMA was used to identify a database by searching through PubMed for articles in the last 10 years. The key words obtained for this study were “self-esteem”, “discrimination”, “mental health”, and “college student.” There were 52 records screened, but 46 records were excluded, due to the little literature available for this topic. Full-text articles excluded with reasons were due to not focusing on the college student population. Full-text articles assessed for eligibility resulted in only five and these studies included qualitative synthesis. Please see figure 1.

#### Data Analysis

In table one, appendix A, information on each study collected were using data analysis tables. Such information included six articles, which included the authors’ first and last names and publication date. These articles defined self-esteem, mental health, and discrimination.

Next, in table two, appendix A, a second data analytic table was used to collect information on each study's reported data on: prevalence of low self-esteem, the prevalence of poor mental health, and the prevalence of discrimination. They each included the last and first names of the authors.

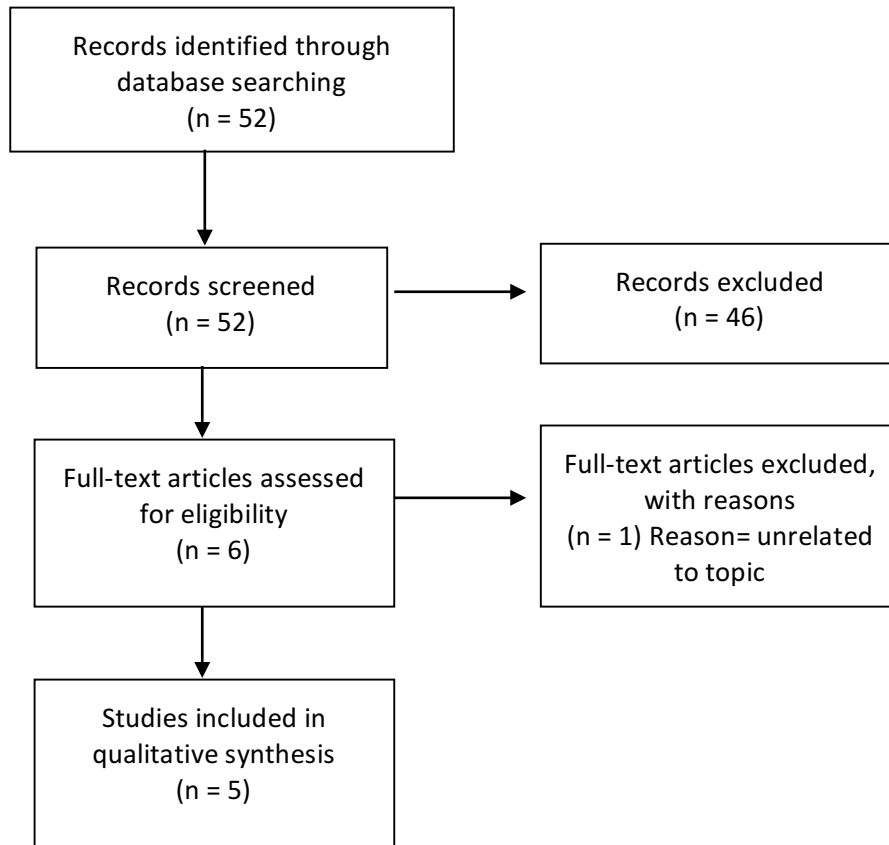


Figure 1. Systematic Review Flow Diagram using PRISMA.

### Ethics

The study was approved by the Institutional Review Board of California State University, San Bernardino.

## CHAPTER FOUR

### RESULTS

The results of this study are divided in relation to each research question:

- 1) What is the relationship between mental health and discrimination among college students?
- 2) Is self-esteem impacted by mental health status and/or discrimination experiences among college students?

#### Study Identification Outcomes and Characteristics

Six studies met inclusion criteria and were included in the review. The location and settings of the studies were similar in which they all took place in different university regions in the United States. Three studies focused on evaluating Asian student population, but for the majority of the studies examined minority groups. All of these studies were surveyed online with using the smallest sample range of 95 students and the largest sample being 5,555 students.

The presence of poor mental health included psychological distress, anxiety, depression, imposter feelings, and suicidal ideation within these studies. The prevalence of low self-esteem in college students was measured in the Rosenberg Self-Esteem Scale, Collective Self-Esteem Scale, and Minority Student Stress Scale. As for the prevalence of poor mental health among students, it was measured through the Psychological Distress Subscale from the Outcome Questionnaire, Beck Anxiety Inventory, Center for Epidemiological Studies Depression Scale, The State- Trait Anxiety Inventory, The Center for

Epidemiological Studies Depression Scale, Cronbach's Alphas Mental Health Inventory, and The Brief Symptom Inventory; Suicidal Ideation. Identifying the presence of discrimination within these students was measured through the Alpha Coefficient Perceived Racial Discrimination Index and Cronbach's Alpha Discrimination Devaluation Scale.

There is a significant relationship between mental health and discrimination among college students, especially within minority groups. Low self-esteem had a high prevalence within the Asian-student community. Wei et al. (2013) conducted a study of 95 Asian American students who identified as being on the receiving end of perceived racial discrimination. Those reported having family support had higher self-esteem compared to those who did not. Individuals with higher self-esteem were less likely to experience the effects of psychological distress because of perceived racial discrimination. This impacts individuals perceived racial discrimination, which was evaluated using a modified version of the Everyday Perceived Racial Discrimination Index. It included nine items to examine daily incidences of discrimination:

being treated with less courtesy than others; less respect than others; receiving poorer service than others in restaurants or stores; people acting as if you are not smart; they are better than you; they are afraid of you; they think you are dishonest; being called names or insulted; and being threatened or harassed (Williams, Yan Yu, Jackson, & Anderson, 1997).



Ratings were on a 7-point scale with 1 indicating strongly disagree to 7 as strongly agree. The coefficient alpha was .91, expressing a high level of perceived discrimination and risk of mental disorders among Asian Americans (Wei, Yeh, Chao, Carrera, & Su, 2013). Self-esteem was another contributing factor that affected these students' mental states. Self-esteem was evaluated using the Rosenberg Self-Esteem Scale, which is a 10-item scale used to measure global self-esteem. These participants' responses were rated on a 4-point scale specifying 1 as strongly disagree to 4 as strongly agree. Coefficient alphas were .88 expressing high self-esteem (Wei et al., 2013). Therefore, there is a significant difference in self-esteem when utilizing family support, which affected these students' psychological distress in regards to perceived racial discrimination. Students with low self-esteem were more prone to psychological distress because of their perception of racial discrimination.

In addition, psychological distress was measured using the Psychological Distress subscale from the Outcome Questionnaire 10.2. This scale included five items that measured general psychological distress. Responses were rated on a 5-point scale ranging from 0 as never to 4 as almost always. The coefficient alpha in the study was .81 (Wei et al., 2013). Asian American students with low self-esteem were vulnerable to racial discrimination without family support, but those with family support were less likely to suffer from psychological distress due to racial discrimination. As for those with high self-esteem, because they

possessed a positive outlook on themselves in general, they were less likely to be affected by perceived racial discrimination.

Similarly, Brian Lam (2007) conducted an experiment among Vietnamese Americans in which 122 individuals participated. He examined the effects of sense of coherence (SOC) on the significance between perceived racial discrimination (PRD), collective self-esteem (CSE), and psychological distress in male students. Collective self-esteem is defined as how highly one believes in themselves integrating their interactions with other individuals who are in these same discourse communities (Lam, 2007). The SOC Questionnaire consisted of 29 items that reflected upon each participant's perception of life whether they felt it was significant, doable, and understandable. A 7-point Likert scale was used indicating 1 as strongly disagree and 7 as strongly agree to signify support levels. The result of this sample was .82 in the alpha for reliability. PRD was measured using by the significance of how much participants felt "racism affects the lives of people of their racial and ethnic group" (Lam, 2007). A 4-point scale displayed 1 as rarely and 4 as all of the time. CSE was determined by using the CSE Scale, which is a "16-item measure with a 7-point Likert format that measures social or collective identity." (Lam, 2007). As a result, CSE was highly related to SOC in the American Vietnamese students. Individuals who had a strong SOC with their ethnic community were less likely to experience any type of affliction. SOC is important because it will determine how these students will handle stress and what type of coping mechanisms they will choose to alleviate their troubles (Lam,

2007). PRD had a strong association with negative psychological well-being, which resulted in individuals experiencing anxiety and depression.

According to Hardy, identity formation is an individual's sense of self while possessing responsibility and psychological maturity. Identity content motivates individuals' process of decision making. If a student holds a mature identity formation, this will positively impact their identity content (2013). This is important because a student who holds an immature formation may handle discriminatory experiences poorly and be more prone to mental illnesses, such as anxiety, depression, and low self-esteem as compared to a student who has a mature identity formation. Confirmatory Factors Analyses (CFA) were conducted with hidden variables such as, moral identity, identity formation, and the six health outcomes, which are moral identity, anxiety, depression, hazardous alcohol use, sexual risk taking, and self-esteem (Hardy, 2013). Commitment making was utilized in this model, in which commitment making and self-esteem resulted in a beta value of .32 and moral identity was positively predictive of self-esteem with a result of beta 0.38. Identity synthesis was predictive of self-esteem with a beta of .68 and moral identity was positively predictive of self-esteem with a beta of 0.27 (Hardy et al., 2013).

MANOVA was used with the Minority Student Stress Scale (MSSS) and was analyzed for ethnic minority differences among the MSSS subscales. There was an effect for ethnicity,  $p < .001$ . Race-related stresses, intragroup stresses, and environmental stresses were examined and the analysis showed that African

Americans experience these stresses at a great extent compared to other races, such as Asian Americans and Latino/a Americans (Mean=3.35). African Americans also experienced race-related stresses at a mean of 3.97 and experienced intragroup stress more at a mean of 3.01 compared to the other minority groups. ANOVA was utilized when analyzing differences in imposter feelings. Results indicated a central effect for ethnicity,  $p < .001$ . For instance, Asian Americans and African Americans had great comparison in imposter feelings, with Asian Americans resulting in a mean score of 3.09, African Americans resulting in mean score of 2.56, and Latino/ a Americans resulting in a mean score of 2.80. MANOVA was used to analyze variation between psychological well-being and psychological distress, which resulted in a major effect in ethnicity, ( $p < .05$ ). In comparison to Latino/ a Americans, African Americans, and Asian Americans, Asian Americans had a mean score of 44.52, African Americans reporting 37.81, and Latino/ a Americans reporting 37.64. This resulted in Asian Americans reporting higher psychological distress compared to the other minority groups. However, in comparison to these three groups in regards to psychological well-being, Asian Americans reported the lowest mean score of 67.72, while African Americans reported ( $M=75.33$ ), and Latino/ a Americans reported ( $M=76.73$ ). "Minority status stress was positively related to imposter feelings and psychological distress and negatively related to psychological well-being. Imposter feelings were also positively related to

psychological distress and negatively related to psychological well-being” (Cokley et. al).

The focus groups conducted on students allowed for examination on major themes, which allowed minority groups to share discriminatory experiences when being of darker skin color, incidences of racial stereotyping, racial profiling, and cultural stereotyping. As a result of the data analysis, the study indicated that self-esteem can significantly be impacted by any type of discrimination a student experiences. It is evident that discrimination exists in the university setting and is affecting college students' self-esteem negatively.

Participants described a plethora of experiences of discrimination, both from within and outside of the family. It was a common trend for participants of the same race to experience discrimination when being of darker skin color or for an individual to be of dark skin color in general. Work place discrimination was also common with participants noting authoritative figures were more likely to practice such discriminatory behaviors. Age was another discriminative factor experienced by older people seeking services from younger workers and with being co-workers with younger individuals. Individuals whose first language was not English have also been discriminated in various instances and those of different cultures have also been belittled for their morals and beliefs. The specific themes noted in the focus groups were racial/ ethnic discrimination, age and gender discrimination, work and education discrimination, impact on mental health, and self-esteem.

Racial/ ethnic discrimination was present within the focus groups in which responses share that with not speaking Spanish, it is suggesting difficulty to be a part of their culture. This is shown in different sectors of their life. This is not only occurring in public settings, but within their family dynamics as well. Although participants in different settings are hyper aware of others' differences. This can definitely cause them to feel as if they do not belong or not capable of belonging. Other responses resulted in a sub-theme under discrimination, which is an expectation of discrimination. It may be harmful to someone's self-esteem because they have this sense of perceived racial discrimination in the back of their mind. Responses witnessing others to experience racial/ ethnic discrimination is important because it is showing that others are able to recognize the different forms of discrimination.

"My Mexican side of the family will be like...You guys are black anyways...I've kind of felt different in a sense... we've always been like kind of kicked to the curb."

"So you're white washed, so you don't belong... when I try [ to speak Spanish] you guys call me white, but then you guys call me black too... So that always kind of... made me feel like a sense of... loss of identity."

"I ... dated... a black guy and when I would... walk around campus... I felt like people would look at me weird or like certain black girls would be... mad at me saying, oh, mm, he's miserable."

“Oh, you’re both just being discriminative because I’m black... oh, but if my brother in law comes here who’s Mexican, you’ll probably service him better than you did to me today.”

“Foreign exchange students sometimes they get looked down upon... when they’re speaking ... it causes them to... gain attention.”

“I notice sometimes when I talk to people, they like to point out my accent.”

“I have experienced discrimination... in a country that wasn’t set up for my people, you know? It was... set up for us to fail, so ... of course, a lot.”

“They judge us and see us as the same person... we may look the same, but we’re completely different.”

“Growing up being black you’re gonna, you’re gonna experience it.”  
I’m Hispanic and I’m light skinned, but once I told them my last name, they had a different approach towards me.”

“Oh if you were lighter, then maybe I would like to talk to you.”

“My dad, he’s Mexican. Um, he likes lowrider cars and we’re like driving ... we got pulled over, like we weren’t doing anything, but my dad got slammed like to the rood of the car... cuz they said he was gang affiliated, but my dad has never even been in a gang, but just because of like the way he looked...”

" I have two little cousins and they're both the same age and one is like blond light-colored eyes and the other one is like darker, you know just a little bit tanner and he like willingly shows like he [grandpa] prefers like the lighter one."

"My dad side is all Mexican and I like, I mentioned that I like I've like dated black guys before and they would get so mad."

"Stupid Chinese, b\*\*\*\*, go back to China!"

"You sound as stupid like how you look like."

"Why are you guys laughing?" They were like cuz um, you sound Mexican. I was like well, I am Mexican and then they were like, no, you're not. They just started arguing with me like, okay, they were Mexican too though. I was like, why are you laughing at my voice? Like I'm not white but they're like, oh whatever, trying to be white or something."

"Sometimes I feel a little different in class...because my English no good, no one wants to work with me."

"One time during class we were choosing groups and I heard people say that the Saudi Arabs are lazy and only cheat."

"My boyfriend is white. He's like why are you so Mexican? I could find someone better than you."

Age and gender discrimination were also common themes in the discussion. Individuals who shared gender discrimination expressed



discrimination differently. Participants who experienced gender identity discrimination are constantly correcting others of their identity and are trying to get others to respect their identity. Other responses try not to allow others to stereotype by gender. Those who experienced age discrimination share that others are skeptical of their teaching and working capabilities due to their young age. These experiences show cases where people are quick to assume that the way a person appears, means their incapable.

“I get misgendered all the time!”

“They always think I’m super young, and that I don’t have any knowledge or background in psychology or anything like that.”

“I think it’s because we are millennials. I’m guessing that’s what it is...that we’re not as competent compared to someone from another generation.”

“It just feels... it sucks to know that someone is undermining a lot of the trainings that I went through and the experience that I got.”

“I wish I could be seen as a professional and not just as seen as ...to young to teach them...”

“They look at me like, less I guess because I’m young.”

“Just being a woman when it comes to like... heavy lifting, I kind of see guys tend to not like, pick me cuz I’m small. For example, I work at the gym, so it’s like lifting treads and all that it’s like let’s send the boys to do it.”

“I’m a girl and I don’t have very much money, so they do whatever they want.”

Work and education discrimination is experienced often within the participants. Workers who possess a higher position have often belittled participants who did not hold a similar position compared to the other professional figures in their occupation. Responses show that choices in academic fields have also been looked down upon by others. The degree of discrimination participants experienced led them to quit their jobs, which impacts their self-esteem and cause them an immense amount of stress.

“I work with... a lot of doctors, nurses... they’re higher education. I feel like sometimes I’m... looked down upon.”

“Oh, well what are you doing? And I’m like oh, I’m doing public health and they’re like oh, well that’s not interesting.”

“When they get into my classes, they say she, oh, this is stupid.”

“My manager discriminated a girl, the way her body figure was, that she was too big.”

“The managers were so much ruder and they would make comments like oh, you’re Mexican? Do you speak Spanish? And I was like yeah, I’m Mexican and then they were like oh, and after that I kind of got less hours and... I had to quit it like it was just bad.”

“...people with money they see all the other people a lot lower...”

When these responses expressed their various forms of discrimination, it is evident that individuals' self-esteem and health were impacted. These incidences have caused these individuals to either question their abilities, worth, or constantly worry over the negative situations they have experienced. Many responses share that these occurrences have caused individuals to feel less, hurt, or down.

"I can't do my job without having that in the back of my mind."

"Now I go to therapy because I used to go to therapy, but now I go to therapy because I talk about all of the stuff that I go through."

"When I go home... I... relink what whatever happened... replay everything in my head."

"It ... takes a toll on me and I try not to think about it as much every time I get mis gendered whether it's like out in public or at work, in school, in the classroom and what not, but I try not to let it take effect on me."

"It's more like a frustration kind of thing... but it also makes me feel like maybe I'm not approaching them the right way... what am I doing that's wrong?"

"I go in the office and just like work out the frustration and it frustrates me because not only do they judge that... I'm a mixed race."

“Yeah, I guess... it sprung like, doubt... maybe... I don’t know what I’m talkin’ about.”

“I’m Salvadorian so a lot of people just look at me as... the book below... but at the end of the day, again it hurt.”

“Some of my friends are also darker they um, they can’t really take punches like some other people I guess, so like if somebody said something... they may carry it with them.”

“She was just kind of shifted until this day I would say she’s a very insecure person...she’s hurt deep down.”

“My grandpa is kind of... really discriminative he... willingly shows... he prefers like the lighter one... she’s just questioning herself... grandpa doesn’t love me...”

“Well, honestly I do get self-conscious about my accent and I think about it all the time now.”

## CHAPTER FIVE

### DISCUSSION

The purpose of this study was to investigate the relationship between mental health status and discrimination experiences among college students, and whether their self-esteem was impacted by these factors. This issue was explored through literature that was systematically analyzed using the PRISMA guidelines, and was further explored through focus groups that examined current incidences of discrimination. These two methods allowed for an extended examination of the literature review and discussion of the focus group results. The results indicate that discrimination experiences negatively affect self-esteem and mental health status.

In the five literatures, three of the studies focused on Asian American students' experiences with discrimination. There was a strong prevalence of perceived racial discrimination in the Asian American student population, which resulted in negative psychological well-being among the students. Asian American students also obtained the highest level of personal stigma compared to every other minority group and also acquired the highest rating for imposter feelings compared to African Americans and Latino/a Americans. Wei et al. (2013) suggests this may be due to their academic culture where Asian males are expected to be higher achieving in their schooling, which may cause them to feel like they are not up to par compared to other students. It is also important to not bring dishonor to their families if they believe they are not successful. This

population also reported the lowest mean score in psychological well-being compared to African Americans and Latino/a Americans. The result of this could be because this population has a high rate of perceived racial discrimination, perceived public stigma, and personal stigma. Asian American students who already have low self-esteem had a strong association between perceived racial discrimination and psychological distress (Wei et al., 2013). Discrimination in both professional and social settings were reported by Latino/a Americans. They also reported being falsely accused of wrongdoings (Hwang & Goto, 2009). This study found that discrimination resulted in increased stress, which led to psychological distress in both Latino/a American and Asian American populations. Asian Americans and Latino/a Americans had similar reactions when dealing with discrimination and having the feelings of stress attached to these instances. Eisenberg's (2009) research suggests that the African American population obtained the highest mean perceived stigma, this includes Asian Americans and Latino/a Americans. This population also reported higher race related stresses, intragroup stresses, and environmental stresses compared to Asian Americans and Latino/a Americans (Cokley et al. 2013). Intragroup stressors can be potentially caused by interactions with others within their occupations, institutions, or communities. When looking at the different articles, it is evident that there is no consensus on which minority group has a higher perceived stigma compared to one another. This is important to acknowledge because further research needs to be done in order to better understand and

help the mental health of the students. Considering the different types of discrimination found in the literature, focus groups were conducted to further obtain more insight on this concerning health topic of how discrimination can negatively impact the self-esteem and mental health among college students.

Focus group discussion responses reinforce the results of the literature in a number of ways. The discussions further delved into the common trends of discrimination these students face. Participants experienced a diverse combination of discrimination based on race, ethnicity, age, gender, education, and occupation. Participants' responses to these discriminations relayed a common negative impact on their mental health and/or self-esteem. The persistence of discrimination has caused respondents to quit their jobs, question their abilities, and have their mental health deteriorate. In both methods, stereotyping and perceived racial discrimination were redundant themes. In the focus group discussions, participants openly shared their experiences with racial discrimination. Specifically, African Americans reported often enduring a significant amount of negative racial stereotypes and racial discrimination. Latino/a Americans were in situations in which they experienced false accusations from others. Asian Americans also experienced needing to meet some type of expectation of achievement whether it was within or outside of their families. The focus group responses align with the literature, showing discrimination and its effects have an immense impact on college students.

In one focus group discussion, it was noted that a participant was asked to share about how their discriminating experience affected their self-esteem, but requested to talk about it later. This may indicate that this individual no longer felt comfortable going forward in the discussion and may have altered their response due to the sensitivity of the topic, but the participant decided to share towards the end of the discussion.

### Strengths and Limitations

Despite the important pattern of findings, both methods have notable limitations. Through the literature, there were limitations in the ethnic minorities samples in which they mainly focused on African Americans, Latino/a Americans, and Asian Americans. For instance, Arab Americans, Indian Americans, and Native Americans were briefly mentioned. Half of the literatures focused on Asian Americans, which may infer a need for more studies on other minority groups. Each study used online self-report survey methods to collect data on each student's experiences on discrimination and their mental health status. One study solely focused on Vietnamese American college students, which is limiting due to the fact that they did not include other members of other Asian ethnic groups. Another study focused solely on Asian American males, which implies that the study did not consider gender perspective. This article by Wei et al. (2013) justifies it by stressing the importance of Asian Americans place on the men in this culture. Perhaps gathering information on age and gender would have



strengthened the study by identifying if they are experiencing different forms of discrimination. Qualitative studies, though useful in exploring novel concepts, are not generalizable. This is a major limitation of the study as the responses are relevant to the samples only.

Nevertheless, there are several strengths of this study. For example, both methods employed in this study exposed the multiple forms of discrimination these students experience and what they have witnessed others to experience first-hand. The focus groups included an abundance of discriminatory experiences in which this trend was evident in the discussions, and unexpected challenges were revealed. Students were not aware of what discrimination was, or had a misconception on it based on their responses. Another emerging theme under discrimination was the expectation on racial discrimination. African Americans expressed this to be a societal norm and may feel indifferent about intentional discriminatory acts. Both methods revealed that family support and support groups helped with students' mental health when experiencing discrimination, or helped them remain positive in general against possible discriminatory acts.

### Recommendations for Research and Practice

Further research is needed to understand what lowers discrimination experiences and how to improve mental health and/or self-esteem among college students. With spreading awareness of different forms of discrimination,

individuals will have a better understanding of the different social factors that may impact their well-being and perception of other students who are struggling mentally. Because minority groups are the prime targets of discrimination, it may be suggested that campuses should develop or encourage students to join activism groups to create social change in their school environment or to provide students a safe space in which they have a sense of belonging (Cokley et al. 2013). Another practice can be to promote the importance of family and social support groups.

In the focus group discussions, it was shown that some responses indicated that individuals did not know the concept of discrimination even after being explained examples. Classes or services are needed in universities in order to better educate students about what discrimination is, how it occurs, and the affects that it can have to better suit the needs of the students. It is also crucial for students to practice self-confidence, whether in support groups, clubs, or organizations because students who already struggle mentally are much more prone to experiencing discriminating situations and are likely to handle it negatively. Students who possess self-stigma are less likely to receive help for their mental illnesses because their mentality is shifted negatively (Wei et al. 2013). It is also important that these students are guided to the proper resources whether it is through online services, on campus services, or outreach services. Due to the different discriminative experiences, counseling and interventions would also aid students from ethnic minority backgrounds.

For universities who currently provide such services, it is vital to consider the population being dealt with. These services need to be accommodating to students, so that they are able to have the option of attending considering their schedules.

### Conclusion

The studies' results indicate that if a student possesses self-worth, they are less likely to negatively internalize discriminative situations towards them self and handle these instances maturely. For those who already have low self-esteem, they more than often, fall into psychological distress when experiencing PRD. Evidently, it is essential students are able to identify what discrimination is and the impact these instances can have on individuals, such as the development of mental illnesses. Because this represents a challenge and opportunity, universities need to ensure they are putting forth effective strategies to educate their students on this pressing issue as this concern has emerged in this study. The literature and focus groups confirm that minority groups experience discrimination in multiple forms and reveal its negative impact on their self-esteem or mental health.

APPENDIX A  
TABLE 1 AND 2

Table 1

<b>Article name</b>	<b>Last name of first author, date</b>	<b>Self-esteem defined as</b>	<b>Mental health defined as</b>	<b>Discrimination defined as</b>	<b>Type Of Study</b>	<b>Sample Size</b>	<b>Population description</b>
Family support, self-esteem, and perceived racial discrimination among Asian American male college students.	Wei et al. 2013	High or Low	Psychological Distress	Racial	Online Self-Report Survey	95	Asian American Male College Students
Impact of perceived racial discrimination and collective self-esteem on psychological distress among Vietnamese-American college students:	Lam et al. 2007	Collective Self-Esteem (Four Dimensional Model of CSE)	Anxiety and Depression	Racial	On Campus Self-Report Questionnaire	122	Vietnamese - American College Students

sense of coherence as mediator							
An Examination of the Impact of Minority Status Stress and Impostor Feelings on the Mental Health of Diverse Ethnic Minority College Students	Cokley et al. 2013	Impostor Feelings	Anxiety, Depression, and Loss of Behavioral Control	Racial	Online Self-Report Survey	240	Ethnic minorities-Asian Americans, Latino/a Americans, and African Americans
Stigma and Help Seeking for Mental Health Among College Students	Eisenberg et al. 2009	n/a	Depressive and Anxiety Disorders	Public Stigma, Personal Stigma, and Perceived Stigma	Online Self-Report Survey	5,555	Students from a diverse set of 13 universities

The Impact of Perceived Racial Discrimination on the Mental Health of Asian American and Latino College Students	Hwang et al. 2009	n/a	Psychological Distress, Suicidal Ideation, and State of Anxiety	Racial	Internet-Based Research Study	186	Asian American and Latino College Students
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Table 2

<b>Last name of first author, date</b>	<b>Prevalence of low self-esteem (<math>\alpha</math>)</b>	<b>Prevalence of poor mental health (<math>\alpha</math>)</b>	<b>Prevalence of discrimination</b>
Wei et al. 2013	.88 Rosenberg Self-Esteem Scale	.81 Psychological Distress Subscale from the Outcome Questionnaire 10.2	.91 Alpha Coefficient Perceived Racial Discrimination Index
Lam et al. 2007	.81 Collective Self-Esteem Scale	Anxiety .81 The State- Trait Anxiety Inventory; Depression .83 The Center for Epidemiological Studies Depression Scale	Mean Score 2.51 Adaptation From Noh et al.'s (1999) Study with Southeast Asian Refugees and From Ying et al (2000).
Cokley et al. 2013	.97 Minority Student Stress Scale	Mental Health .76 and .93, respectively Cronbach's Alphas Mental Health Inventory	n/a
Eisenberg et al. 2009	n/a	n/a	Perceived Public Stigma .89 Cronbach's Alpha Discrimination Devaluation Scale; Personal Stigma .78 Cronbach's Alpha Discrimination Devaluation Scale
Hwang et al. 2009	n/a	.97 The Brief Symptom Inventory; Suicidal Ideation.71 Scale for Suicidal Ideation; State and Trait Anxiety .93 and .90, respectively State and Trait Subscale; Clinical Depression .93 Coefficient Alpha Hamilton Depression Inventory	n/a



APPENDIX B  
INSTITUTIONAL REVIEW BOARD APPROVAL

**Consent Form**  
**Discrimination Experiences and Self-Esteem**

You are invited to participate in a study concerning whether college students face discrimination in their daily lives and how that impacts their self-esteem. This study is being conducted by Dr. Monideepa B. Becerra (faculty) and Master of Public Health graduate student, Cindy Mahoney, from the Department of Health Science and Human Ecology at California State University San Bernardino (CSUSB). This study has been approved by CSUSB's Institutional Review Board.

**Purpose:**

The project will investigate how often and what types of discrimination do college students face in their daily lives and whether these experiences impact self-esteem.

**Procedure:**

You will hold informal discussion with the investigators in small groups at a time arranged between you and the team. The discussion will be recorded but no names or identifiable information will be recorded. The total discussion will take between 45 minutes to 1 hour.

**Risks and Benefits:**

Your participation will involve minimal risk, however, during participation you may feel uncomfortable discussing your experiences. Participation is completely voluntary and you may refuse participation at any time or refuse to answer any individual question that causes discomfort. The benefits of the study may provide insight into the barriers students face in their daily lives so we can create a program for support.

**Confidentiality:**

Research records will be kept confidential to the extent allowed by law. All data will be collected anonymously and no identifiable information, such as name, student ID, address, etc. will be collected. All recordings will be stored at CSUSB password protected computer and destroyed 5 years after publishing data. Results of this study may be published but no names or identifying information will be used.

**Right to Refuse:**

Your participation is voluntary and you are free to withdraw from participation at any time. Your withdrawal will not impact your academic standing and/or any other aspect of your schooling/work. Please notify the researchers if you experience distress during or after participation. If you have additional questions please contact Monideepa B. Becerra, DrPH, MPH [mbecerra@csusb.edu](mailto:mbecerra@csusb.edu) or 909-537-5969 (faculty researcher).

I have carefully read and/or I have had the terms used in this consent form and their significance explained to me. By checking the box below, I agree that I am at least 18 years of age and agree to participate in this project and approve recording of my responses.

☐ Yes, I have read and understood the terms and I agree to participate.

909.537.5339

The California State University • Bakersfield • Channel Islands • Chico • Dominguez Hills • East Bay • Fresno • Fullerton • Humboldt • Long Beach • Los Angeles  
Maritime Academy • Monterey Bay • Northridge • Pomona • Sacramento • San Bernardino • San Diego • San Francisco • San Jose • San Luis Obispo • San Marcos • Sonoma • Stanislaus

APPENDIX C  
IRB APPROVAL LETTER



January 24, 2019

**CSUSB INSTITUTIONAL REVIEW BOARD**

Expedited Review

IRB-FY2019-120

Status: Approved

Prof. Monideepa Becerra

CNS - Health Science

California State University, San Bernardino

[5500 University Parkway](#)

[San Bernardino, California 92407](#)

Dear Prof. Monideepa Becerra:

Your application to use human subjects, titled "EMS support assessment" has been reviewed and approved by the Institutional Review Board (IRB). The informed consent document you submitted is the official version for your study and cannot be changed without prior IRB approval. A change in your informed consent (no matter how minor the change) requires resubmission of your protocol as amended using the IRB Cayuse system protocol change form.

Your application is approved for one year from January 24, 2019 through January 24, 2020.

Please note the Cayuse IRB system will notify you when your protocol is up for renewal and ensure you file it before your protocol study end date.

Your responsibilities as the researcher/investigator reporting to the IRB Committee include the following four requirements as mandated by the Code of Federal Regulations 45 CFR 46 listed below. Please note that the protocol change form and renewal form are located on the IRB website under the forms menu. Failure to notify the IRB of the above may result in disciplinary action. You are required to keep copies of the informed consent forms and data for at least three years.

You are required to notify the IRB of the following by submitting the appropriate form (modification, unanticipated/adverse event, renewal, study closure) through the online Cayuse IRB Submission System.

- 1. If you need to make any changes/modifications to your protocol submit a modification form as the IRB must review all changes before implementing in your study to ensure the degree of risk has not changed.**
- 2. If any unanticipated adverse events are experienced by subjects during your research study or project.**
- 3. If your study has not been completed submit a renewal to the IRB.**
- 4. If you are no longer conducting the study or project submit a study closure.**

Please ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.

The CSUSB IRB has not evaluated your proposal for scientific merit, except to weigh the risk to the human participants and the aspects of the proposal related to potential risk and benefit. This approval notice does not replace any departmental or additional approvals which may be required. If you have any questions regarding the IRB decision, please contact Michael Gillespie, the IRB Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at [mgillesp@csusb.edu](mailto:mgillesp@csusb.edu). Please include your application approval identification number (listed at the top) in all correspondence.

Best of luck with your research.

Sincerely,

*Donna Garcia*

Donna Garcia, Ph.D., IRB Chair  
CSUSB Institutional Review Board

DG/MG

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